

SCC eFile

2012 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

212532348

1.) CORPORATION NAME:

**Mac Risk Management, Inc.**

DUE DATE: **8/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY**

**Bank of America Center, 16th Floor  
1111 East Main Street**

SCC ID NO: **F1429200**

**RICHMOND, VA 23219**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**MA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1385 Hancock Street

CITY/ST/ZIP: Quincy, MA 02169-5103

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	NICHOLAS PARILLO		
TITLE:	PRESIDENT		
ADDRESS:	45 DAN RD		
CITY/ST/ZIP/CO:	CANTON, MA 02021		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	THOMAS A. HIPPLER		
TITLE:	SECRETARY		
ADDRESS:	45 DAN ROAD		
CITY/ST/ZIP/CO:	CANTON, MA 02021		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	KAREN BRAINARD		
TITLE:	ASST SECRETARY		
ADDRESS:	45 DAN RD		
CITY/ST/ZIP/CO:	CANTON, MA 02021		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	STEVEN WEISMAN		
TITLE:	ASST SECRETARY		
ADDRESS:	45 DAN ROAD		
CITY/ST/ZIP/CO:	CANTON, MA 02021		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	GREGORY A STAY		
TITLE:	TREASURER		
ADDRESS:	185 CAMPANELLI DRIVE		
CITY/ST/ZIP/CO:	BRAINTREE, MA 02184		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	THOMAS HIPPLER		
TITLE:	DIRECTOR		
ADDRESS:	13815 HANCOCK ST		
CITY/ST/ZIP/CO:	QUINCY, MA 02169		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ KAREN BRAINARD</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>KAREN BRAINARD, ASST SECRETARY</u> PRINTED NAME AND CORPORATE TITLE	<u>8/24/2012</u> DATE
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.